

2004-2005 Application for Scholarship Dropout Prevention Specialist (DPS) Certificate Program

Return original to:
Counseling and Student
Support Office
1430 N St, Ste 6408
Sacramento, CA 95814

Name of District Superintendent:			<i>Approval of this grant application is subject to availability of funds.</i> The purpose of this grant is to assist the applicant to achieve DPS certification through completion of a comprehensive fieldwork-based Dropout Prevention Specialist Certificate training program offered by an accredited California State University. NOTE: Districts may NOT apply for this funding if the school is designated as a Charter School and it is currently utilizing the Block Grant Funding Model (<i>Education Code</i> section 47634). CDS Code:			
School District:		District Address:				
School:		School Address:				
Name of the Designated Fieldwork Supervisor: (see pg 4)		Address of Fieldwork Supervisor:				
Title:		Email:				
Dates of Participation: <div style="display: flex; justify-content: space-between; font-size: small;"> Date of 1st Class / /04 Last Date of Class 6 / /05 </div>			Name of CSU Site where the student is enrolled:			
Individual Enrolling in the Program:			<div style="display: flex; justify-content: space-between; font-size: small;"> County: District: School: </div>			
Title/Paid Position at the School:			Address:			
Telephone: ()			Email:		Fax: ()	
City:			Zip:			
<p>Certification: I hereby certify that all applicable state and federal rules and regulations will be observed by this applicant; that to the best of my knowledge, the information contained in this application is correct and complete; and that the attached assurances are accepted as the basic conditions in the operations of this project/program for local participation and assistance. I also certify that: 1) the expenditures reported have been made, and the programs have been conducted in accordance with federal and state laws and regulations, and with the approved application and its amendments; and 2) full records of receipts and expenditures have been maintained and are available for audit.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>_____ Signature -- Principal or designated Fieldwork Supervisor</p> <p>_____ Signature -- Chairperson, School Site Council (SSC)</p> <p>_____ Signature -- Board President or Designee</p> </div> <div style="width: 10%;"> <p>_____ Title</p> <p>_____ Title</p> <p>_____ Title</p> </div> <div style="width: 45%;"> <p>_____ Date</p> <p>_____ Date</p> <p>_____ Date</p> </div> </div>						

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GENERAL ASSURANCES

Date:

District:

School:

The applicant agency, by signature of its authorized representative (district superintendent or designee) on the first page of this application, hereby, assures the California Department of Education that the agency will adhere to the following assurances:

1. Programs and services are and will be in compliance with Title VI and Title VII of the Civil Rights Act of 1964, the California Fair Employment Practices Act, Governmental Code Section 11135, and Chapter 4 (commencing with Section 30) of Division I of Title 5, California Code of Regulations (CCR). A statement of compliance with Title VI of the Civil Rights Act of 1964 has been filed with the Superintendent of Public Instruction.
2. Programs and services are and will be in compliance with Title IX (nondiscrimination on the basis of sex) of the Education Amendments of 1972.
3. Each program or activity conducted by the LEA will be conducted in compliance with the provisions under Chapter 2 (commencing with Section 200), Prohibition of Discrimination on the Basis of Sex, of Part 1 of Division 1 of Title 1 of the *Education Code* and all other applicable provisions of state law prohibiting discrimination on the basis of sex.
4. Programs and services are and will be in compliance with the affirmative action provisions of the Education Amendments of 1972.
5. Programs and services are and will be in compliance with the Age Discrimination Act of 1975.
6. Programs and services for handicapped persons are and will be in compliance with the Education for All Handicapped Children Act of 1975, Section 613(1), and Section 504 of the Rehabilitation Act of 1973.
7. When federal funds are made available, they will be used to supplement and, to the extent practicable, increase the amount of state and local funds that would, in the absence of such federal funds, be made available for the uses specified in the state plan, and in no case supplant such state or local funds.
8. All state and federal statutes, regulations, program plans, and applications appropriate to each program under which federal or state funds are made available through this application will be met by the applicant agency in its administration of each program.
9. The local educational agency will use fiscal control and fund accountability procedures that will ensure proper disbursement of, and accounting for, state and federal funds paid to that agency under each program.
10. The local educational agency will make reports to the state agency or board and to the Secretary of Education as may reasonably be necessary to enable the state agency or board and the Secretary to perform their duties and will maintain such records and will provide access to those records as the state agency or board or the Secretary deem necessary. Such records shall include, but will not be limited to, records which fully disclose the amount and disposition by the recipient of those funds, the total cost of the activity for which the funds are used, the share of that cost provided from other sources, and such other records as will facilitate an effective audit. The recipient shall maintain such records for five years after the completion of the activities for which the funds are used.
11. Any application, evaluation, periodic program plan, or report relating to each program will be made readily available to parents and other members of the general public.
12. Auditable records of each participating school program will be maintained on file at the district office. (T5 3944; CFR 220.56)
13. The district board of trustees has adopted written procedures to ensure prompt response to complaints from parents, members of advisory committees, and members of other groups within 30 days, and has disseminated these procedures to parent/community groups in the district.

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Date: _____

District:	School:
Information Submitted: <input type="checkbox"/> Original <input type="checkbox"/> Amendment No.: _____	Type of Report <input checked="" type="checkbox"/> Budget <input type="checkbox"/> Expenditure
LEVEL: <input type="checkbox"/> High School <input type="checkbox"/> Elementary School <input type="checkbox"/> Alternative School <input type="checkbox"/> Middle School <input type="checkbox"/> District <input type="checkbox"/> Other	

LINE	ACCT. NO.	CATEGORY AMOUNT	
1	4000	BOOKS AND SUPPLIES <i>(Books estimated to cost \$220)</i>	\$
2	5200	TRAVEL <i>(mileage to and from classes)</i>	\$
3	5200	REGISTRATION FEE	\$
		TOTAL GRANT AMOUNT REQUESTED	\$

(Total of lines 1-3 cannot exceed \$2,000)

Please check the box indicating the certificate program you will be participating in:

☐ Dropout Prevention Specialist Program - **Certificate of Participation**
(earning 24 continuing education units)

<u>\$ 235</u>	<u>\$ 30</u>	<u>\$ 1,590</u>
Registration Fee	Web CT Online Course Fee X 6 Courses =	Total

☐ Dropout Prevention Specialist Program - **Certificate of Academic Achievement** *(earning 12 post-baccalaureate units of academic credit)*

<u>\$ 430</u>	<u>\$ 30</u>	<u>\$ 2,760</u>
Registration Fee	Web CT Online Course Fee X 6 Courses =	Total

Total grant amount requested for this scholarship cannot exceed \$2,000.

The California Department of Education's approval of this grant application does not automatically register the DPS participant in the program. To register for the Dropout Prevention Specialist Certificate Program, please call Jennifer Mackey or Rina DeRose, California State University, Sacramento at (916) 278-4813 or Janice Bruett, California State University, Hayward at (510) 881-2321.

I am ☐ currently enrolled **or** ☐ plan to enroll at the following CSU Program Site:

☐ Sacramento ☐ Hayward ☐ El Monte/Los Angeles
☐ Fresno ☐ Other _____

Please specify

Dates of Participation: _____ to _____
mm/dd/yyyy *mm/dd/yyyy*

ALLOWABLE EXPENSES

Only **one** grant will be approved per school (which may include multiple candidates) per fiscal year to support employees seeking a Dropout Prevention Specialist Certificate.

The school may reimburse student tuition, travel to and from classes, necessary software, and required books and materials. Tuition will be reimbursed upon *successful* completion of each course.

While a computer with internet access will be a requirement for the DPS courses, no funds may be used for capital outlay (e.g., computers, printers, DSL connection, modems, etc.). Monthly dial-up internet service provider costs cannot exceed \$200 for all six classes.

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CONDITIONS OF FUNDING

The local education agency agrees that as a condition of funding it will institute, develop, or maintain the following programs and strategies at the applicant school listed above to support their dropout prevention efforts:

Resiliency and Asset Development Programs
The Role of the Dropout Prevention Specialist
Early Identification and Early Intervention
Effective Dropout Prevention Models
Mentoring Programs
Student Learning Assessment and Accountability
Coordination of Services Formal Meetings

Student Study Team/Student Success Teams
SAP - School Assistance Program
Family Involvement Models
School/Community Safety
Community and Private Sector Collaboration
Student Attendance Support

The local education agency further assures that the district office supervisor, county office of education supervisor, or principal named below agrees to act as the designated **Fieldwork Supervisor**. The fieldwork supervisor has the responsibility to verify required activities and the completion of coursework assignments. Fieldwork supervisors will report to the course instructors on a timely basis to verify the competency requirements for the DPS Certificate. This service will be provided without charge to the accrediting college, university or the California Department of Education.

PURPOSE OF THE GRANT FUNDS

Grant funds are used to reimburse costs for enrollees successfully completing courses leading to the Dropout Prevention Specialist Certificate offered at an accredited college campus in California. Upon successful completion of each course, funds are to be used for reimbursement of registration fees, travel and necessary supplies up to a maximum of \$2,000 per enrollee. Costs for completion of the program beyond the grant award amount are the responsibility of the individual participating in the program. The primary objective of this certificate program is to provide building blocks of knowledge, skill, and practice for each student to be a successful Dropout Prevention Specialist. The program provides exposure to relevant literature and model program strategies and expands the depth of knowledge and training related to dropout prevention and school reform for those who want deeper understanding and facility with these concepts, processes, and strategies, etc. Additionally, the program provides a core body of knowledge and practice for new and continuing dropout prevention workers, principals, and district administrators within funded and non-funded SB 65 program schools. Students receive three levels of pedagogical experience: 1) on the CSU campus in formal courses, 2) at the fieldwork site in the form of a site-level internship at a school implementing these rigorous dropout prevention strategies, and 3) via a unique distance learning opportunity where course material and discussions take place via an on-line internet format.

FIELDWORK SUPERVISOR ASSURANCES

As the (*check one*) ☐ district office supervisor ☐ county office of education supervisor ☐ principal, I agree to all the assurances listed above, including implementing and supporting the dropout prevention programs and strategies listed above, and agree to serve as fieldwork supervisor for the Dropout Prevention Specialist Certificate candidate.

Signature

Printed Name and Title

Date